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# NIH Public Access; Everything You Need To Know

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EVERYTHING YOU NEED TO KNOW

# About the policy

- Mandated in April, 7 2008.  
<https://publicaccess.nih.gov/policy.htm>
- Publications reporting research funded by NIH grants made freely available in PubMed Central (PMC) no later than twelve months after the final, published version appears in print and or online.
- PubMed Central (PMC), the online, open access, digital library of the National Institutes of Health's National Library of Medicine.
- NIH will delay processing of an award or a Progress Report (RPPR) if compliance if not met.

# What does the Policy apply to?

- Does not apply to:
  - Articles reporting on research funded by agencies other than NIH.
  - Review articles, books, book chapters, meeting abstracts, or dissertations.
- Does apply to all peer-reviewed\* journal articles reporting on research funded by NIH grant(s).

\*Articles reviewed by experts before it is published.



# Four methods of submitting publications to PubMed Central

- Method A, submission is *automatic*.
- Method B, submission is by *request*.
- Method C, submission is done *manually*.
- Method D, submission is *assisted*.

# Method A

- Journal deposits *final published* article into PubMed Central *without grantee author, or delegate involvement*.
- The article is made available no later than 12 months after publication.
- List of these journals  
[https://publicaccess.nih.gov/submit\\_process\\_journals.htm](https://publicaccess.nih.gov/submit_process_journals.htm).

# Method B

- Grantee, author, or delegate asks publisher to deposit **specific** final published article in PubMed Central.
- The publisher will request an *open access fee* to do the deposit.
- Arrangements must be made to ensure that the article is made publically available no later than 12 months after publication.
- A list of these publishers can be found at [https://publicaccess.nih.gov/select\\_deposit\\_publishers.htm](https://publicaccess.nih.gov/select_deposit_publishers.htm).

# Method C

- Grantee, author, or delegate deposits final, peer-reviewed manuscript into PubMed Central via the NIH Manuscript Submission System (NIHMS).
- If other submission methods do not apply, this is the method that *must* be followed for compliance.

# Method D

- Publishers have volunteered to deposit a final, *peer-reviewed* when they determine that it falls under the NIH Public Access Policy.
- Grantees are responsible for ensuring that the manuscript is deposited upon acceptance for publication.
- The person assigned as *a reviewer* of the deposit must complete all remaining in order for the submission to be in compliance .
- A list of these publishers can be found at  
*<https://publicaccess.nih.gov/Method D Publisher>.*

# Depositing into NIHMS

- The NIH Grantee/Principle Investigator (PI) is responsible for compliance and moving the manuscript through the tasks involved in all the steps.
- However, some of the steps can be assigned to a delegate—author of the manuscript or administration staff.

# What cannot & can be deposited

- Cannot:

- >Final .PDF version of the published article.

- >Page/galley proofs.

- >Both of the above versions fall under copyright.

- Can:

- >The final, peer-reviewed manuscript.

- >All the figures, tables, and supplemental materials.

- >Both of the above versions fall under copyright.



## Mini-review

### AXIN1 and AXIN2 variants in gastrointestinal cancers

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#### ABSTRACT

Mutations in the APC (adenomatous polyposis coli) gene, which encodes a multi-functional protein with a well-defined role in the canonical Wnt pathway, underlie familial adenomatous polyposis, a rare, inherited form of colorectal cancer (CRC) and contribute to the majority of sporadic CRCs. However, not all sporadic and familial CRCs can be explained by mutations in APC or other genes with well-established roles in CRC. The AXIN1 and AXIN2 proteins function in the canonical Wnt pathway, and AXIN1/2 alterations have been proposed as key defects in some cancers. Here, we review AXIN1 and AXIN2 sequence alterations reported in gastrointestinal cancers, with the goal of vetting the evidence that some of the variants may have key functional roles in cancer development.

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#### Introduction

Somatic mutations in genes functioning in the canonical, or  $\beta$ -catenin-dependent, Wnt pathway are found in approximately 90% of colorectal cancers (CRCs) [1]. These mutations contribute to CRC development by stabilizing the “free” signaling pool of  $\beta$ -catenin via disruption of the “ $\beta$ -catenin destruction complex”, which includes the APC (adenomatous polyposis coli) [2–4], AXIN1 [5–7], AXIN2 [8,9], and GSK3 $\beta$  proteins [10,11]. The most common destruction complex defects in CRCs are loss of function mutations in the APC tumor suppressor gene, although a subset of CRCs have CTNNB1 mutations encoding a mutant  $\beta$ -catenin protein that is likely resistant to regulation by the destruction complex [12,13]. While APC is the most frequently mutated Wnt pathway tumor suppressor gene, both germline and somatic mutations in the AXIN1 or AXIN2 genes have been identified in a subset of CRCs and in several other cancer types. Since the first reports of AXIN1/2 mutations in cancer, other studies have been completed and AXIN1/2 sequence polymorphisms in the general population have been better defined. The purpose of this review is to offer a comprehensive update of the reported constitutional and somatic AXIN1 and AXIN2 sequence variants described thus far. Previous publications addressing AXIN1/2 mutations have reviewed selected variants and have sometimes used different AXIN1/2 reference sequences, making it difficult to compare mutations in a comprehensive fashion. Additionally, since

the time of some prior publications, germline sequence variation in control populations has been described in more detail [14]. In-depth evaluation of previously reported and recently reported AXIN1/2 mutations with reference to consistently annotated AXIN1/2 amino acid sequences and the current list of known polymorphisms will lead to a better understanding of which AXIN1/2 sequence variants may confer functional consequences for cancer development. While this review specifically addresses AXIN1/2 mutations in gastrointestinal (GI) cancers, a comprehensive table of AXIN1/2 sequence alterations reported in non-GI cancers is shown in Appendix: Supplementary Table S1.

#### The Wnt/ $\beta$ -catenin pathway

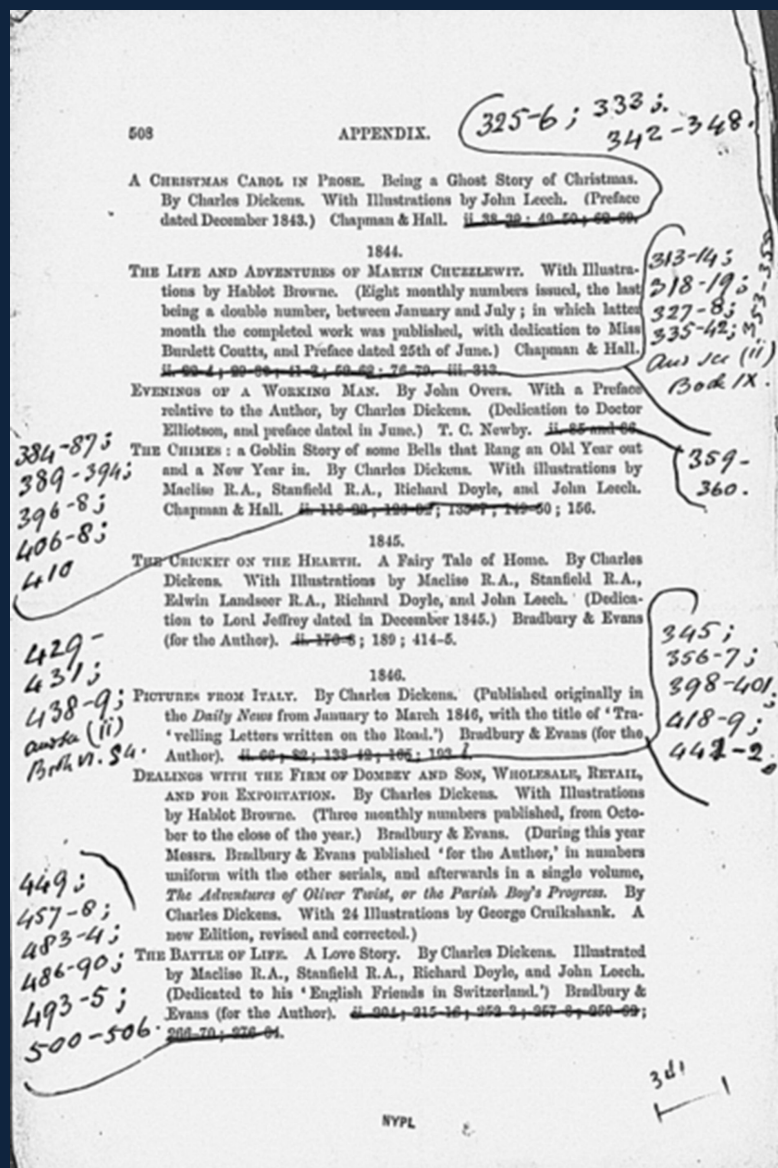
The canonical Wnt pathway regulates cell fate during development and cellular homeostasis in adult tissues, and Wnt pathway dysregulation is seen in many cancer types (reviewed in Anastas and Moon) [15]. The canonical Wnt pathway transmits extracellular Wnt signals to the nucleus via effects on  $\beta$ -catenin levels and localization [16]. In the absence of an activating Wnt ligand, a protein complex assembles to phosphorylate  $\beta$ -catenin at multiple residues in its amino-terminal domain [12,13,17,18]. The phosphorylated  $\beta$ -catenin is then recognized by a ubiquitin ligation protein complex and subsequently targeted for degradation by the proteasome [19]. The APC, AXIN1, and AXIN2 proteins are thought to function in the assembly of a  $\beta$ -catenin destruction complex. When an activating Wnt ligand is present, the destruction complex is inhibited and the free, signaling pool of  $\beta$ -catenin can translocate to the nucleus, where  $\beta$ -catenin binds to TCF/LEF transcription factors to modulate the expression of target genes [16,20–22].

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E-mail address: [fearon@umich.edu](mailto:fearon@umich.edu) (E.R. Fearon).



# Page/Galley Proofs

The preliminary versions of publications meant for review.



# Depositing Checklist:

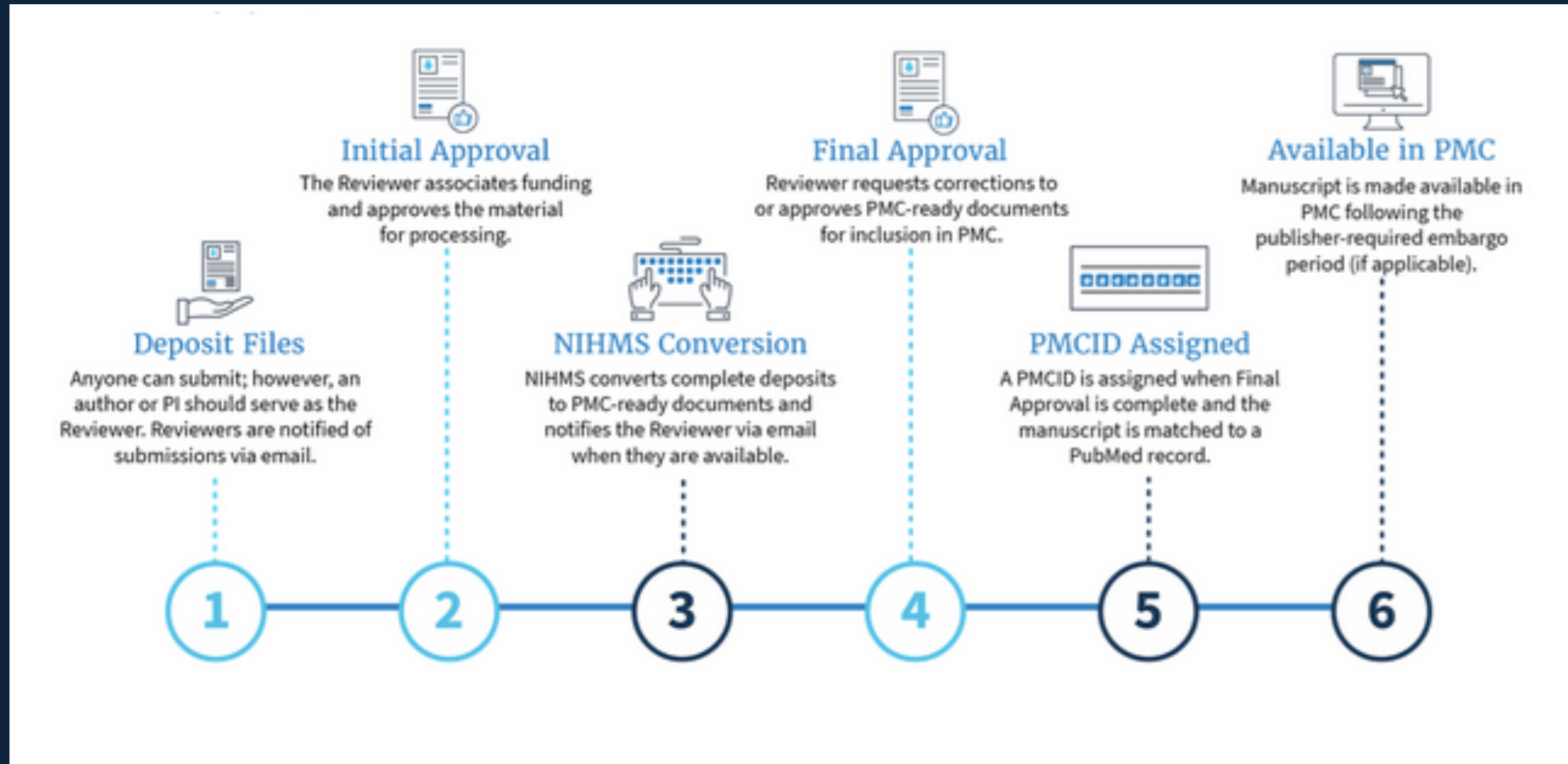
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\* Time period, in months, that the publisher retains rights to distribution of the article. Upon submission to PubMed Central and until the embargo period passes, PubMed Central will provide a brief record of the manuscript.V

# When can deposit be made?

- Once the journal acknowledges the manuscript is accepted for publication.
- Remember the embargo should be 12 months post publication.
- Depositing retrospectively, a year or more after publication, you can set the embargo less than 12 months.

# Depositing into the NIH Manuscript Submission System (NIHMS) involves multiple steps.



This image indicates at what point the deposited manuscript is within NIHMS.

# Deep Dive into Method C











- Deposit of the final, peer-reviewed manuscript into PubMed Central is done via the National Institutes Manuscript Submission System (NIHMS).
- Can be done by the grantee, the author of the publication, or an individual acting as a proxy acting assigned to make the deposit.

Depositing into NIHMS

# Login to NIHMS

- *<https://www.nihms.nih.gov/login/?next=/submission/>*
- Use the credentials that apply to you.

## Log in

NIH staff and intramural researchers  <b>NIH Login</b>	NIH, AHRQ, CDC, FDA, and VA grantees  <b>eRA Commons</b>	AHRQ, CDC, FDA, ACL and ASPR staff and intramural researchers  <b>HHS AMS</b>
NASA civil servants  <b>NASA Launchpad</b>	NASA grantees  <b>NASA ORCID</b>	NIST intramural researchers  <b>NIST Account</b>
EPA intramural researchers  <b>EPA Account</b>	EPA and ACL awardees, DHS Contacts, Publishers, and Others  <b>NCBI Account</b>	<a href="#">more login options</a>
HHMI investigators  <b>HHMI Account</b>	HRA awardees  <b>Google Account</b>	Forgot your login route? <a href="#">Request Email Reminder</a>

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Enter the grant number if you have it or the grantee who was awarded it.

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After all aspects of the deposit are complete, a Submission Statement appears. Clicking on Agree moves the deposit onto the next step in compliance.

## Submission Statement

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Files: 1 manuscript, 4 figures

I am an author of this manuscript, and I am providing it to the National Institutes of Health (NIH) to make publicly available in PubMed Central **6 months** after its official date of publication in the journal.

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- *PMCID/PMC* is the number assigned to show that the publication is in full compliance with the Policy—PMCID:185221 or PMC185221.
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- *PMC Journal – In Process* signifies that the Publisher deposited, into NIHMS, the final, print version of the publication but the deposit has not received a PMC identifier. A list of these journals can be found at [https://publicaccess.nih.gov/submit\\_process\\_journals.htm](https://publicaccess.nih.gov/submit_process_journals.htm).
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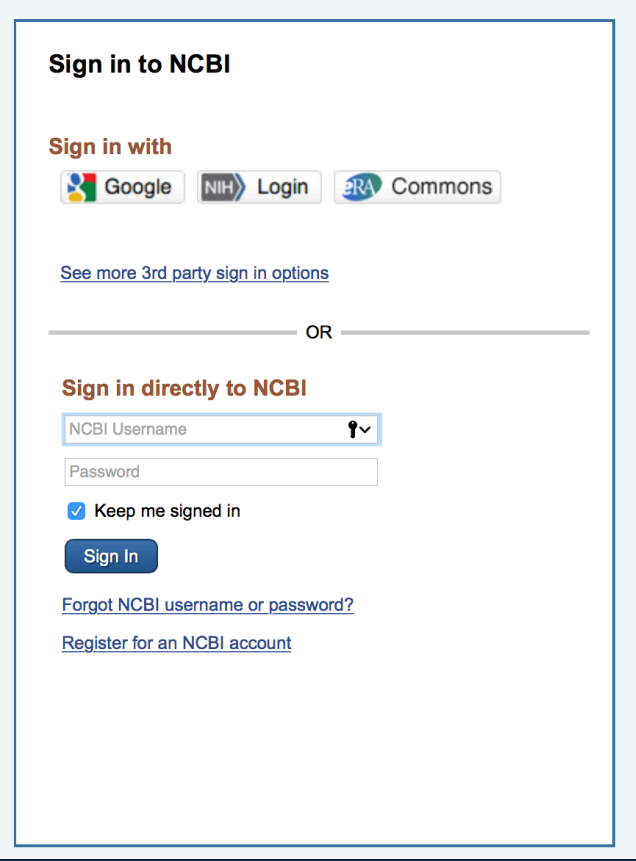
# Tracking compliance in My Bibliography

# What is My Bibliography in My NCBI?

- An application to be used by NIH Grantees for managing publications or products that need to comply with the NIH Public Access Policy.
- Accessed by signing into National Center of Biotechnology Information (NCBI).
- If you do not have a My NCBI account, you can register for one and it is “free”.
- The publications and / or products entered into My Bibliography will show compliance status and the NIH Grant(s) that supports it.
- My Bibliography must be linked to the Grantees eRA Commons.
- This linking enables the Grantee and / or their delegate, when preparing a grant application, grant renewal, or a Research Performance Progress Report (RPPR) to have access to the publications to be cited.

# Registering for a My NCBI account

- Go <https://www.ncbi.nlm.nih.gov>
- Click on Sign in to NCBI in the upper right corner of the screen.
- You have options to sign in or register for an account.

A screenshot of the NCBI 'Sign in to NCBI' page. The page has a white background with a blue border. At the top, it says 'Sign in to NCBI'. Below that, there's a section 'Sign in with' with three buttons: 'Google' (with the Google logo), 'NIH Login' (with the NIH logo), and 'eRA Commons' (with the eRA Commons logo). Underneath these buttons is a link that says 'See more 3rd party sign in options'. A horizontal line with 'OR' in the center separates this from the next section. The next section is 'Sign in directly to NCBI'. It contains a text input field for 'NCBI Username' with a dropdown arrow on the right, and a text input field for 'Password'. Below the password field is a checkbox labeled 'Keep me signed in' which is checked. At the bottom of this section is a blue button labeled 'Sign In'. Below the 'Sign In' button are two links: 'Forgot NCBI username or password?' and 'Register for an NCBI account'.

# Important Changes to NCBI Accounts Coming in 2021



<https://ncbiinsights.ncbi.nlm.nih.gov/2021/01/05/important-changes-ncbi-accounts-2021/>

# My Bibliography and eRA Commons

- eRA Commons is a set of web tools used for the administrative activities of NIH Grants.
- My Bibliography must be linked to the Grantees eRA Commons.
- The Publication entered into My Bibliography will show compliance status and the NIH Grant(s) that supports it.
- This linking enables the Grantee and/or the delegate, when preparing a grant application, grant renewal, or a Research Performance Progress Report (RPPR) to have access to the publications to be cited.

# Linking MY BIBLIOGRAPHY to eRA Commons

1. Log into My NCBI.
2. Click on your login name at top right of the window to get to your account settings.
3. Click on the “Change” button for “Linked Account”.
4. You can scroll to the list “Login Account Options” and click on “NIH & eRA Commons” or search for NIH which should show “NIH & eRA Commons”, click on it.
5. You can only link to one account. If you have linked to another account click on “Change” and follow steps in #4.
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**Linked accounts**

**Change** 

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Columbia University	Research Organizations
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Georgetown University	Research Organizations
Google	OpenID
Indiana University	Research Organizations
Johns Hopkins University	Research Organizations
Lawrence Berkeley National Laboratory	Research Organizations
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1. The person the Grantee wants to make a delegate should have a My NCBI account.
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3. Clicks on the username at the top-right of the screen to access Account Settings.
4. Scroll down to Delegates.
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6. Click “OK”.
7. Message sent to Delegate.
8. Delegate clicks on the link.
9. Delegation accepted.

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To [redacted] ☆

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If you believe you have received this message in error, you may simply ignore it or contact the requestor [redacted] for clarification.

Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. You may send questions, problems, and comments to [info@ncbi.nlm.nih.gov](mailto:info@ncbi.nlm.nih.gov).

Thank you,

The My NCBI Team

## Delegate for [redacted]

### Delegation acceptance confirmed

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You have accepted the connection with [redacted].  
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# My Bibliography Version 3.0

- Released in 2019 and is a redesigned interface
- Displaying options at the top of the page to manage citations, add citations, search citations, sort citations.
- Also, there is a unique URL allowing for the sharing of the citations in the Bibliography or making it private.

The numbers on the banner at the top of the window indicate the number of citations in the Bibliography and their compliance status. Clicking on each will sort those citations according to the compliance status.

## My Bibliography

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Page 1 of 1

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131 

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1 

Public Access Compliance: Not defined

90 

Public Access Compliance: Complete

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## Green

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Fleming JT, Brignola E, Chen L, Guo Y, Zhao S, Wang Q, Li B, Correa H, Ermilov AN, Dlugosz AA, Chiang C. [Insight into the Etiology of Undifferentiated Soft Tissue Sarcomas from a Novel Mouse Model](#). Mol Cancer Res. 2019 May;17(5):1024-1035. doi: 10.1158/1541-7786.MCR-18-0117. Epub 2019 Jan 25. PubMed PMID: 30683671; PubMed Central PMCID: PMC6497566.

### Public Access Compliance

Complete. PMCID: [PMC6497566](#)



[5 Awards](#)

Click on *5 Awards* allows you to see the NIH grant(s) associate with the publication.

**Publications color-coded in red are either non-compliant or not defined.**

**Non-compliant articles may have award(s) associated to them by clicking on Add Award, but the manuscripts have not been submitted to the NIH Manuscript Submission (NIHMS) system. By clicking Edit Status the compliance process can be started.**

#### Red

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Quinonez SC, Park JM, Rabah R, Owens KM, Yashar BM, Glover TW, Keegan CE. [9p partial monosomy and disorders of sex development: review and postulation of a pathogenetic mechanism](#). Am J Med Genet A. 2013 Aug;161A(8):1882-96. doi: 10.1002/ajmg.a.36018. Epub 2013 Jul 3. Review. PubMed PMID: 23824832.

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Ragland RL, Arlt MF, Hughes ED, Saunders TL, Glover TW. [Mice hypomorphic for Atr have increased DNA damage and abnormal checkpoint response](#). Mamm Genome. 2009 Jun;20(6):375-85. doi: 10.1007/s00335-009-9195-4. Epub 2009 Jun 7. PubMed PMID: 19504344.

#### Public Access Compliance

Non-compliant. Citation not in NIHMS or PMC. [\[Edit Status\]](#)

[1 Award](#)



Publications in blue that have recently been submitted to NIHMS are considered in process and display the color coded in blue and display the NIHMS ID number.

Ruetz M, Campanello GC, McDevitt L, Yokom AL, Yadav PK, Watkins D, Rosenblatt DS, Ohi MD, Southworth DR, Banerjee R. [Allosteric Regulation of Oligomerization by a B<sub>12</sub> Trafficking G-Protein Is Corrupted in Methylmalonic Aciduria](#). Cell Chem Biol. 2019 Apr 11;. doi: 10.1016/j.chembiol.2019.03.014. [Epub ahead of print] PubMed PMID: 31056463; NIHMSID:NIHMS1525671.

**Public Access Compliance**

In process at NIHMS. NIHMS ID: [NIHMS1525671](#) [\[Edit Status\]](#)

[1 Award](#)



Another blue color-coding option would be that the journal deposits the final, published version of the publication and the tag is PMC Journal-In-Process

Ravi B, Antonellis A, Sumner CJ, Lieberman AP. [Genetic approaches to the treatment of inherited neuromuscular diseases](#). Hum Mol Genet. 2019 Jun 22;. doi: 10.1093/hmg/ddz131. [Epub ahead of print] PubMed PMID: 31227836.

**Public Access Compliance**

PMC Journal - In Process [\[Edit Status\]](#)

[1 Award](#)



Publications not funded by NIH grants or were accepted for publication prior to April 7, 2008 are color-coded in gray and marked *Not Applicable-Exempted*.

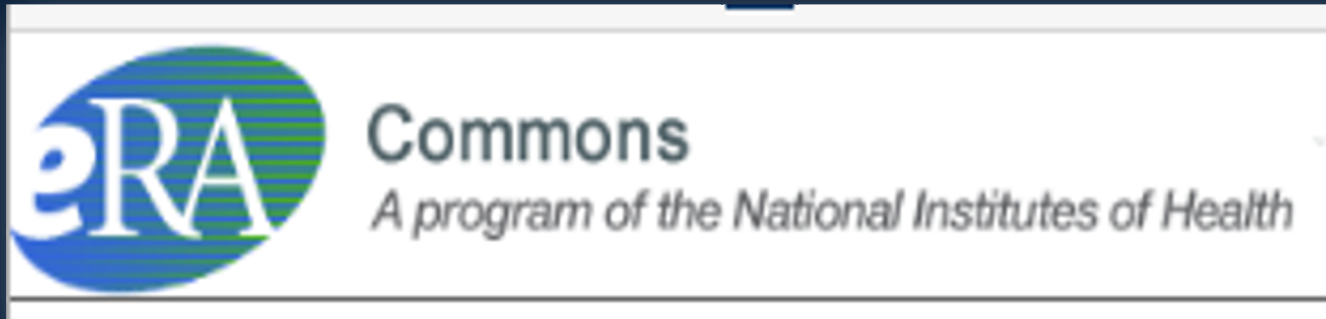
Howell VM, Jones JM, Bergren SK, Li L, Billi AC, Avenarius MR, Meisler MH. [Evidence for a direct role of the disease modifier SCN1 in splicing](#). Hum Mol Genet. 2007 Oct 15;16(20):2506-16. doi: 10.1093/hmg/ddm206. Epub 2007 Jul 26. PubMed PMID: 17656373.

**Public Access Compliance**

Not applicable- Exempted. [\[Edit Status\]](#)

[+ Add Award](#)

eRA Commons is a set of web tools that are used for the administrative activities of NIH Grants.

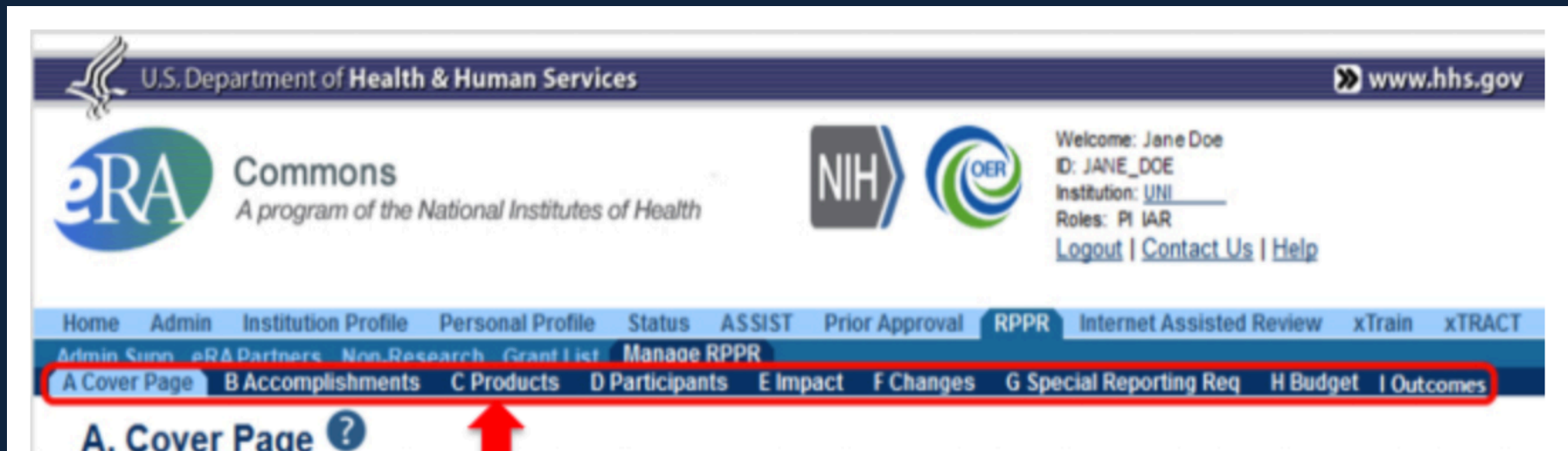


# Public Access Policy & eRA Commons

- If you cite a paper that falls under the Policy in an NIH grant application or progress report (Research Performance Progress Report RPPR), even if you are not an author, you must include a PMCID.
- Progress reports (RRRR) document grantee accomplishments and compliance with terms of an NIH award.
- RPPRs can be done by the Grantee, a delegate assigned by the Grantee, or a signing official who has “institutional authority to legally bind the institution in grants administration matter.
- The “institutional authority” is the Office of Research and Special Projects (ORSP).

# Research Performance Progress Report RPPR

Logging into Commons and clicking RPPR initiates the progress report and reveals the list of the various parts of the RPPR that must be completed.

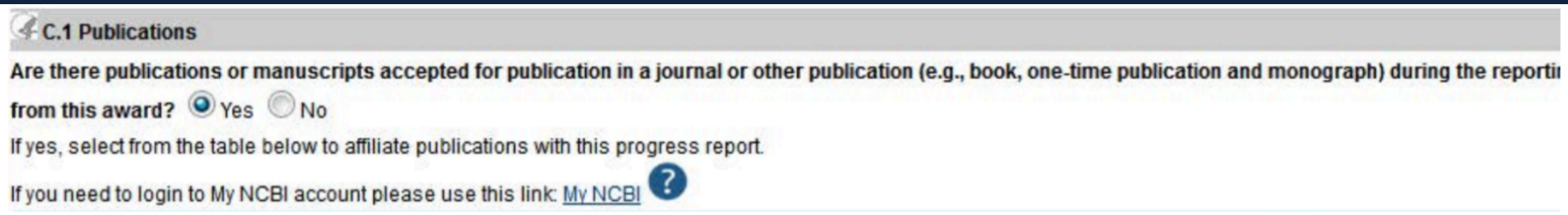


# RPPR Section C.1-Products

- In this section all publications reporting research funded by an NIH Grant are reported.
- The publications listed here come from the Grantee's My Bibliography that has been linked to Commons.
- Publications that fall under the NIH Public Access Policy and are non-compliant still must be reported and have 10 days to get into compliance.
- It is advised that getting these non-compliance publications into compliance be done as soon as possible to ensure that the award is renewed in a timely manner.

# How to report products aka publications


- If there are no publications to report select No.
- If there are publications to report select Yes.



**C.1 Publications**

Are there publications or manuscripts accepted for publication in a journal or other publication (e.g., book, one-time publication and monograph) during the reporting period from this award? ☒ Yes ☐ No

If yes, select from the table below to affiliate publications with this progress report.

If you need to login to My NCBI account please use this link: [My NCBI](#) 

- If Yes is selected three tables will open.



# The tables

Are there publications or manuscripts accepted for publication in a journal or other publication (e.g., book, one-time publication, monograph) during the reporting period resulting directly from this award? ☐ Yes ☐ No

If yes, select from the table below to affiliate publications with this progress report. (?) (?)

All publications associated with this project in My NCBI		
Associate with this RPPR	NIH Public Access Compliance	Citation
<input checked="" type="checkbox"/>	Complete	<a href="#">Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity</a>
<input checked="" type="checkbox"/>	Not Applicable Not Peer Reviewed	<a href="#">Smith J, Doe J. Process of Abstracting Simple Notes for Cancer Research. 2011 Jan 31; 123(4): 56-78. PMID: PMC1234567.</a>
<input checked="" type="checkbox"/>	In Progress	<a href="#">Hennessy S, Bilker WB, Leonard CE, Chittams J, Palumbo CM, Karlwish JH, Yang YX, Lautenbach E, Baine WB, Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity measures. J Clin Epidemiol. 2007 Sep; 60(9): 911-8. PMID: 11689807. PMID: PMC2042508.</a>
<input checked="" type="checkbox"/>	Non-Compliant	<a href="#">Merriam NA, Putt ME, Metz DC, Yang YX. Hip fracture risk in patients with a diagnosis of pernicious anaemia. Gastroenterology. 2010 Apr; 138(4): 1330-7. PMID: 20026065. PMID: PMC2954457.</a>

Sort Table Above By

☐ Ascending ☐ Descending

Then By

☐ Ascending ☐ Descending

☒ (+) Show publications from My NCBI ☐ (-) Hide publications from My NCBI (?) (?)

Publications not previously reported which are associated with the grant

Publications not associated with this project in My NCBI		
Associate with this RPPR	NIH Public Access Compliance	Citation
<input type="checkbox"/>	Complete	<a href="#">Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity</a>
<input type="checkbox"/>	Not Applicable Not Peer Reviewed	<a href="#">Smith J, Doe J. Process of Abstracting Simple Notes for Cancer Research. 2011 Jan 31; 123(4): 56-78. PMID: PMC1234567.</a>
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Sort Table Above By

☐ Ascending ☐ Descending

Then By

☐ Ascending ☐ Descending

Publications not yet associated with award

Publications previously reported for this project (?) (?)	
NIH Public Access Compliance	Citation
Complete	<a href="#">Metlay JP. Observed association between antidepressant use and pneumonia risk was confounded by comorbidity</a>
Not Applicable Not Peer Reviewed	<a href="#">Smith J, Doe J. Process of Abstracting Simple Notes for Cancer Research. 2011 Jan 31; 123(4): 56-78. PMID: PMC1234567.</a>
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Publications on prior RPPRS



# The tables and My Bibliography

- The tables in the RPPR Products draw information from the Grantees My Bibliography in the My NCBI account.
- The publication data in these tables is dynamic until the progress report is submitted to the agency.
- Any change to the data occurring in PubMed, PubMed Central, the Grantees My Bibliography account, or in the compliance status of a publication, will refresh upon saving the C.1 Products section, or opening the RPPR in another session.
- When the progress report is submitted to the agency, the publication data is frozen in the progress report.

# Responding to non-compliance notifications.

- The grantee must respond to this a non-compliance notification.
- “NIH can accept anything other than compliance with the policy only in the **rarest** of circumstances, such as a death of the sole author.”
- “NIH will not process RPPRs until all papers arising from the award are compliant with the public access policy. That means funding for awards with non-compliant RPPRs could be delayed. The NIH manuscript submission system (NIHMS) is processing papers in about 3 weeks. We encourage you to ensure compliance well before your RPPR is due to avoid delays processing your RPPR and receiving funding.” *Posted on September 27, 2017*

# Access the NIH Public Access Policy canvas tool for an in depth understanding of everything covered in the workshop.

NIH Public Access Policy (NIHPAP)

No Term

Home

Modules

Learn The Policy

Select NIHMS Submission Method

Deposit Manuscript into NIHMS

Track Compliance in My Bibliography


Associate Compliant Publications in eRA Commons

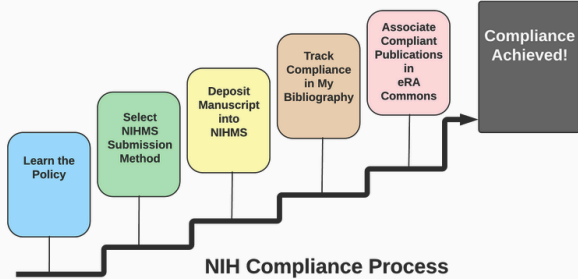
Interactive Compliance Steps: Simplified

Resources

Glossary

NIH Public Access Policy (NIHPAP)





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graph LR; A[Learn the Policy] --> B[Select NIHMS Submission Method]; B --> C[Deposit Manuscript into NIHMS]; C --> D[Track Compliance in My Bibliography]; D --> E[Associate Compliant Publications in eRA Commons]; E --> F[Compliance Achieved!];
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NIH Compliance Process

This course was developed by the University of Michigan Taubman Health Sciences Library for NIH grantees and their support staff by providing a clear understanding of the National Institutes of Health Public Access Policy (NIHPAP), how to comply, and how to manage publications in eRA Commons using the My Bibliography portal in My NCBI.

Select the [first module](#) to learn more about the policy and work your way through each module. You may also jump to any module from this homepage or left navigation menu. To view a simplified and interactive tool of the NIHPAP compliance process, select [Interactive Compliance Steps: Simplified](#) or click in the left navigation menu.

Modules:

Learn the Policy

Select NIHMS Submission Method

Deposit Manuscript into NIHMS

Track Compliance in My Bibliography

Associate Compliant Publications in eRA Commons

<https://umich.instructure.com/courses/257336>